

option to voluntary nonprofit organizations, not to require them, either directly or indirectly, to undertake criminal fingerprint background checks for employees and volunteers. Chairman McCOLLUM has assured me, both personally and in his statement, that failure to seek or obtain a criminal fingerprint background check should not be construed as a basis for, or offered as evidence of, liability in civil litigation against a nonprofit voluntary organization where the lawsuit is based on the conduct or actions of an employee or volunteer.

Once again, I would like to congratulate the gentlemen from Florida for their herculean efforts to pass this important legislation, and I thank them for the privilege of making a statement on the bill. I urge my colleagues to vote in favor of the measure.

IN HONOR OF THE PEARL BUCK
CENTER'S 45TH ANNIVERSARY

HON. PETER A. DeFAZIO

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 8, 1998

Mr. DEFAZIO. Mr. Speaker, it is my privilege and honor to congratulate Pearl Buck Center on 45 years of dedicated service to individuals with developmental disabilities.

When Pearl Buck opened in 1953, it was one of the only educational programs in Oregon providing educational services to children with mental retardation and other developmental disabilities. Pearl Buck Center has continued this tradition of leadership in the community, the state, and the nation, providing vocational training, employment, education, and case management services to people with developmental disabilities.

Annually, Pearl Buck Center provides services to about 400 individuals with developmental disabilities and their children. Since it was founded, Pearl Buck Center has helped thousands of adults and children meet the challenges of their disabilities and find opportunities to succeed in school and on the job; to succeed as parents and as self-sufficient individuals; and to contribute to the community and society.

I would like to acknowledge the hard work and spirit of service that characterizes this organization. I hope that all Americans will reflect on the dedication of the staff and volunteers of Pearl Buck Center and on the struggles and successes of the individuals they serve.

I extend my deepest appreciation and thanks to Pearl Buck Center for their efforts, past and present, to help individuals with disabilities more fully realize their abilities, potential, and independence. We are all richer for your 45 years of service.

SPECIAL RECOGNITION OF SENATOR BEN GAETH (DEFIANCE-OH) UPON HIS RETIREMENT FROM PUBLIC SERVICE

HON. MICHAEL G. OXLEY

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 8, 1998

Mr. OXLEY. Mr. Speaker, I rise to honor a true public servant and long time friend, Sen-

ator Ben Gaeth of Defiance, Ohio. Senator Gaeth served with distinction from 1975 to the present in the Ohio Senate, and during that time I had the privilege of working with him on many issues of the day. Ben has also represented my home county of Hancock for 23 years during his tenure in the Senate and has always been a responsive and responsible legislator who has represented the best interest of his constituents during his illustrious career.

Senator Gaeth was first elected to the Senate in 1975 serving the people of the 1st Ohio Senate District. Before this he was Safety Director for the City of Defiance from 1962 until 1965. After this, he went on to serve a long career as the Mayor of Defiance until 1974. He has served as President in the Mayor's Association of Ohio as well as the Ohio Municipal League.

He has fought to preserve our nation's heritage and our children's freedom. He was wounded while in the Navy in the Pacific and Atlantic War Theaters. Mr. Speaker, Senator Gaeth is a true American Hero.

His many civic duties and charities include the Defiance Area Chamber of Commerce, Rotary Club, Masonic Lodge, Order of the Purple Heart, Veterans of Foreign War, Amvets, American Legion, Loyal Order of Moose, Eagles, and BPO Elks. As you can readily see, it is a wonder that he has had any time to raise a wonderful family.

He has three children, seven grandchildren and one great-grandchild.

In closing, Mr. Speaker, we extend our best wishes to Ben and his lovely wife, Thelma, on this well earned retirement. Ben and Thelma have truly been inspirations to all of us in public service and have exemplified all that is best about politics and government.

IN HONOR OF THE 50TH ANNIVERSARY OF THE GERMAN SCHOOL COMMITTEE

HON. LOIS CAPPS

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 8, 1998

Mrs. CAPPS. Mr. Speaker, I rise to bring to the attention of my colleagues the 50th Anniversary of the German School Committee in San Luis Obispo, California on October 24, 1998.

The year 1998 marks the 50th Anniversary of the German School Committee exchange student program between San Luis Obispo High School in San Luis Obispo, California and Eberhard Ludwigs Gymnasium in Stuttgart, Germany, as the second oldest international student exchange of its kind.

The German School Committee began in 1948 at San Luis Obispo High School as a postwar goodwill project affiliated with the American Friends Service Committee, which sent goods to Eberhard Ludwigs Gymnasium students.

Ethel Cooley, former Dean of Women at San Luis Obispo High School, directed the program from 1948–1991, and Chris Hovis and Deborah Nelson have directed the program from 1992 to the present. A true student exchange program and a strong bond between the two high schools has developed during the past 50 years, enriching the stu-

dents' and families' lives by building cultural bridges in their respective communities.

Mr. Speaker, I congratulate the German School Committee student exchange program on their 50th Anniversary, and for fostering friendships between students from culturally diverse backgrounds.

CLOSING THE HUGE HOLE IN
MEDICARE'S BENEFITS PACKAGE:
STARK INTRODUCES MEDICARE
PRESCRIPTION DRUG BENEFIT

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 8, 1998

Mr. STARK. Mr. Speaker, I rise today to introduce the Medicare Prescription Drug Coverage Act of 1998 to remedy a huge hole in the program's benefits package—outpatient prescription drug coverage. Twice in the past 10 years, Congress has almost provided this benefit, and twice we have failed. We established a drug benefit in the Medicare Catastrophic legislation of 1988, but it was repealed the next year before the benefit could start. A drug benefit was a key component of H.R. 3600, the Health Security Act of 1994, reported by the Ways and Means Committee, but failed to pass that year.

It is time to debate this issue again and try some new approaches.

While Congress has done nothing, drug costs have been soaring out of the reach of millions of seniors enrolled in traditional Medicare.

In 1995, 46% of seniors enrolled in fee-for-service Medicare were without drug coverage. Almost one-quarter of beneficiaries enrolled in Medicare HMOs (about 4% of all beneficiaries) do not have a drug benefit.

And in the face of projections that prescription drug prices are about to spike again, following a brief slowdown during the 1993–94 health care reform debate, the number of seniors with no drug benefits could accelerate.

By 2007, the Health Care Financing Administration projects drug costs will account for over 8% of total health care costs, up from 6% in 1996. Viewed another way, that could mean double-digit price increases. For many beneficiaries with modest incomes, no retiree health coverage, and too many assets to qualify for Medicaid, these economic trends mean they will be forced to rely on traditional Medicare—with no drug coverage.

In effect, we are rapidly creating a large underinsured class of Medicare beneficiaries.

So as we approach the millennium, I will pose the question again: Why doesn't Medicare have a drug benefit? Why do nearly all Americans who have private insurance, which includes every member of Congress, enjoy drug coverage, while millions of seniors do not?

Most Americans have heard stories about seniors who must make repeated, difficult choices to buy either prescription drugs or other necessities—like food. The health toll this produces is not easy to quantify. Researchers report that seniors without drug coverage frequently decide to go without medications for conditions such as headaches and muscle aches. What is less well known is that